5: Fleure S-5 (no date)1939 EDI Rumania EDI

MEDICAL CONDITIONS AT CURTEA DE ARGEŞ

CURTEA DE ARGEŞ is a small town of 6,831 inhabitants (in 1930), situated in the valley of the River Argeş, at an altitude of 1,400 feet.

A SERIES of wells supply the town with water, there being no system of pipes to supply running water. The drainage system is necessarily of a primitive type, the dry closet type being the one in use.

THE TOWN possesses two hospitals:

(1) A general hospital with pavilion for epidemic cases.

(2) Home for incurables—a branch of a nerve clinic in Bucharest.

THE GENERAL HOSPITAL is situated in the centre of the town on a slight eminence, a few yards from the main street. It consists of two wards, one for men and one for women. The cases are mixed, medical and surgical cases being nursed in the same ward. There are fifteen beds for men and fifteen for women. In addition there are two small wards for clean surgical cases, each containing two beds.

THE BEDS are of the usual hospital type, but placed close together about three feet apart. The mattresses and pillows are stuffed with straw and are very hard. The patients wear their own clothes. This being summer, less than one half of the beds were in use. The villagers refuse to come to hospital in summer, when there is work to be done in the fields, unless in cases of stern necessity. A belief in witchcraft and secret remedies is prevalent, so that progress as regards treatment is hampered. Epidemics of dysentery and typhoid are common. Tuberculosis is widespread, and goitre is found in all the villages in this valley. Cretinism in the children is untreated, and most villages contain cases. No medication of the water supply is undertaken. Pulmonary tuberculosis is treated in sanatoria, but other cases of tuberculosis are admitted here. Cancer is also common, but is not dealt with here—the cases are sent to Bucharest for radium treatment.

164 Rickets[1] is unknown, and difficult labour among peasant women is rare, though puerperal fever is common. In some instances, if there is a midwife, she is shared by several [847] villages. A law has recently been passed forbidding attempts at abortion, but it is not strictly enforced. There are a good many infant deaths. Maternal morbidity is not high, in [142] spite of the prevalence of puerperal fever. The women as a whole are robust, of good physique and inured to hardship. [757] The French treatment of sepsis by induced (turpentine) abscess is common and is found to be very successful, the fever running its course in 7-8 days, with low mortality rate. [855] Children are breast-fed, feeding bottles being unknown. The feeding continues until the age of one year or longer. Infantile paralysis is unknown in this district, though it does occur in other parts of the country. Rheumatism and arthritis are common.

743 752 A SMALL operating theatre is attached to the hospital[1] for emergency cases like suppurating appendices and ruptured hernia, other cases being sent to the hospitals in larger towns. Small surgical operations are also performed. The table is convenient, in that it can tilt at any angle from head to foot, but it cannot be lowered or raised at will. The only light is a small electric globe high up in the ceiling, with no facilities for lowering. Operations are, however, mostly done in daylight. If necessary, lamps or even candles are requisitioned. A small room for sterilising purposes opens off the theatre.

743 164 THE PAVILION for infectious cases is situated about twenty feet from the main building, in close proximity to the staff house and kitchen. Its beds were empty at the moment of inspection. Scarlet fever is the most common epidemic in this vicinity, and the beds were full one month ago. Epidemics of dysentery and typhoid also occur. Typhus is not known here, though frequent in Bessarabia. Diphtheria is fairly common.

759 THERE ARE a medical doctor and a surgeon in attendance, the latter being only part-time.

743 THE HOME for the incurables was next visited. It is a handsome villa, situated near the main street, but farther from the centre of the town. As before stated, it is a branch of the nerve clinic in Bucharest, and is under the supervision of

1 [in Curtea De Arges -- Analyst]

743 Prof. Dr. Cantacuzene, who visits it two or three times yearly. A doctor is in charge with a Sister of Mercy as nurse and two untrained local nurses, one for the men and one for the women. There are thirty male beds and twenty female beds. The cases are mainly paralytic and epileptic, with a certain number of war invalids and diabetics. The beds were mostly empty when seen, as the cases are ambulant.

[764]

BATHROOM and lavatory accommodation in both hospitals is necessarily primitive.

759 744 THERE ARE three other doctors in the town—one for the military, another for the insurance societies, and a third for the direction of general sanitary work, corresponding to a British Medical Officer of Health. The headquarters of the last-named are at the Mayor's office. Medical inspection takes place once a month in the schools, each child being examined thoroughly each time. There are no dentists in the town, extraction of teeth, etc., being performed by the local doctors. Vaccination is obligatory and is done when the child is one month old. At the age of seven, on entry into school, a second vaccination is required, and in the case of a boy, at the age of 18, when he begins his premilitary service.

[751]

758 AS REGARDS payment for medical treatment, poor people who cannot afford to pay are treated free, otherwise 10-20 lei is charged for a consultation and 20-30 lei per day in hospital. Most of the patients are insured against sickness by paying regular contributions under State guidance.

759 DOCTORS RECEIVE their training in one of the three centres, Cluj, Bucharest or Jassy. Cluj is considered the best equipped. So far there are no medical text-books in Roumanian. German text-books and German medical traditions are followed at Cluj, while French text-books and French traditions are in use at Bucharest and Jassy. One year is spent in preparation, Chemistry, Physics, etc., being studied. Five years of actual medical work, theoretical and practical, follow. For the past eight years a further course of two years in specialised work at a hospital has been insisted upon.

N. H. S.

[in Curtea De Arges -- Analyst]

146 262 Largely because of its cost, the consumption of sugar is very low, except among the well-to-do in the towns. (To encourage sugar-beet growing, a high price was set by the Government.)

[785] The diet is further impoverished by the long religious fasts—seven weeks before Easter, six weeks before Christmas, two shorter summer periods, plus Wednesdays and Fridays of each week. The diet during the fast includes practically no food of animal origin. Children under 10 years do not normally observe these fasts and, in fact, usually have a better diet during these periods since more milk, eggs and butter are available for them.

The diet, though fairly adequate in energy value, is short of animal protein, fats and calcium; moreover, where maize is the principal cereal lack of vitamin B_1 may be very serious. Various symptoms of vitamin and mineral deficiencies are [165] observed, and the high infant-mortality rate—the highest in Europe—is also partly due to malnutrition. One of the most serious effects of the poor diet is the nervous disease pellagra, caused by this deficiency of the vitamin B_1 factor. In Moldavia, where maize is the staple food, about 5 per cent. of the rural population suffers from pellagra every ● [164] spring. In the whole country about 3,000 deaths occur each year from this disease (compared with 4,000 in the maize-eating southern states of U.S.A.).

The average annual pre-war food consumption of Rumania is shown in the following table, with comparative figures for the United Kingdom.

Average per Head Consumption

	Rumania		*United Kingdom*	
	Kg	*Lb.*	*Kg*	*Lb*
Wheat and rye	104	229	120	285
Maize	166	365	—	—
Potatoes	50	110	84	185
Sugar	5	11	43	95
Meat	17	37	63	139
Milk	70	123*	94	165*
Butter	1	2	11	24
Pig fat	4	10	5	11
Vegetable oil	1·5	3	—	—
Margarine	—	—	4	10
Calories per day	2,700		3,100	

*Pints

B. WAR-TIME CHANGES

1. Territorial Changes

228 241 311 The net effect of the territorial changes which have occurred since 1939 is the loss of Northern Transylvania to Hungary and of Southern Dobruja to Bulgaria. For two seasons' crops, 1940 and 1941, Rumania was without Bessarabia, but in the late summer of 1941 she not only regained Bessarabia but acquired administrative control of the Soviet territory now styled Transnistria, and this has made small contributions to the food supplies of Rumania in 1942-43. Ignoring Transnistria, however, Rumania lost 12 per cent. of her former arable area and grain production. The Transylvanian areas ceded to Hungary, though not rich agriculturally, probably needed only small imports of grain to supplement their own production, while south Dobruja, though a surplus-producing area, contributed only a fraction to Rumania's total agricultural production. The country's potential agricultural export remains, therefore, substantially what it was before the war.

241 722 ~~2.~~ Agriculture in War Years

Germany, at the outbreak of the war, looked to the Danube countries, and to Rumania in particu-

[9a]